## Political Organization Notice of Section 527 Status

OME No. 1545-1693

| Part I General Information                                      |                        |   |  |                        |  |
|---|------------------------|---|--|------------------------|--|
| 1 Name of organization  |                        |   | Employer identification number               |                        |  |
| Regular Republican Organ  |                        |   |  | 22 3734287             |  |
| 2 Mailing address (P.O. Box or number, 10 Allen Street Suite 1A |                        | m or suite nur                          | mber)  |                        |  |
| City or town, state, and ZIP code                               |                        |   |  |                        |  |
| Toms River, N.J. 08753  |                        | <del></del>                             |  |                        |  |
| 3 E-mail address of organization F holman@hotmail.com           |                        |   |  |                        |  |
| 4a Name of custodian of records                                 |                        | 4b Custodian's address                  |  |                        |  |
|   |                        | 10 Allen Street, Suite 1A               |  |                        |  |
| Frank B. Holman, III  | Toms River, N.J. 08753 |   |  |                        |  |
| 5a Name of contact person                                       |                        | 5b Contact person's address             |  |                        |  |
|   |                        | 10                                      | Allen Street, Suite                          | <u>ia</u>              |  |
| Frank B. Holman, III  | Toms River, N.J. 08753 |   |  |                        |  |
| 6 Business address of organization (if d                        | ifferent from ma       | ailing address                          | shown above). Number, street, an             | d room or suite number |  |
| City or town, state, and ZIP code                               |                        |   | · · · · · · · · · · · · · · · · · · ·        |                        |  |
| Part II Purpose   |                        |   |  |                        |  |
| 7 Describe the purpose of the organization                      | tion                   |   |  |                        |  |
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|   |                        | RECEIVED IN CORRES  1RS - OSC / 616     |  |                        |  |
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|   |                        | *************************************** | 0  | GDEN, UTAH             |  |
|   | *************          |   |  |                        |  |
| Part III List of All Related Ent                                | ties (see ins          | tructions)                              |  |                        |  |
| 8a Name of related entity                                       | 8b Relations           |   | 8c Address                                   |                        |  |
| Ocean County  |                        |   | 10 Allen Street Suite 1A                     |                        |  |
|   |                        |   |  |                        |  |
| Republican Finance Com.   | Committee              |   | Toms River, N.J. C                           | 08753                  |  |
|   |                        |   |  |                        |  |
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|   |                        |   |  |                        |  |
| For Department Reduction Act Notice se                          |                        |   | Cat No 30405V                                | Form 8871 /7-2000      |  |

| 9a Name                        | 9b Title   | 9c Address  |
|--------------------------------|--|---|
|                                |  | 10 Allen Street   |
| George Gilmore                 | President  | Toms River, N.J. 08753  |
|                                |  | 10 Allen Street Suite 1A  |
| Frank B. Holman, III           | Treasurer  | Toms River, N.J. 08753  |
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| the                            | eclare that the organization names examined this notice, including a | id in Part I is to be treated as an organization described in selection 527 of the internal accompanying schedules and statements, and to the best of my know ledge and belief. |
| Sign   Signature of authorized | official   | Date  |